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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	013258.0172
	First Named Inventor	McAnalley, Bill H.
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOSITIONS OF PLANT CARBOHYDRATES AS DIETARY SUPPLEMENTS

the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

08/04/1997

as United States Application Number of PCT International

Application Number PCT/US97/13379

and was amended on (MM/DD/YYYY)

08/11/1998

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/022,467	08/09/1996	
60/030,317	11/01/1996	
60/057,017	07/24/1997	

(Page 1 of 2)

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US97/13379	08/04/1997	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Randall C. Brown	31,213	Steven E. Ross	35,996
Rick Matos	40,082	Henry T. Crenshaw	37,805
Kenneth R. Glaser	24,015	Michael E. Martin	24,821
Richard L. Schwartz	27,227	George R. Schultz	35,674

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Randall C. Brown				
Address	Akin, Gump, Strauss, Hauer & Feld, L.L.P.				
Address	P.O. Box 688				
City	Dallas	State	TX	ZIP	75313-0688
Country	U.S.	Telephone	214/969-4769	Fax	214/969-4343

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Bill H.		McAnalley			
Inventor's Signature				Date	
Residence: City	Grand Prairie	State	TX	Country	U.S.
				Citizenship	U.S.
Post Office Address	4921 Corn Valley				
Post Office Address					
City	Grand Prairie	State	TX	ZIP	75052
				Country	U.S.

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US97/13379	08/04/1997	

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Rick Matos	40,082	Henry T. Crenshaw	37,803
Kenneth R. Glaser	24,015	Michael E. Martin	24,821
Richard L. Schwartz	27,227	George R. Schultz	35,674

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☒ Correspondence address below

Name	Randall C. Brown		
Address	Akin, Gump, Strauss, Hauer & Feld, L.L.P.		
Address	P.O. Box 688		
City	Dallas	State	TX
Country	U.S.	Telephone	214/969-4769
		Fax	214/969-4343

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Bill H.	McAnalley

Inventor's Signature	Bill H. McAnalley TX	Date	8 Feb 99
Residence: City	Grand Prairie	State	TX
		Country	U.S.
Post Office Address	4921 Corn Valley		
Post Office Address			
City	Grand Prairie	State	TX
		ZIP	75052
		Country	U.S.

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
<u>H. Reginald</u>				<u>McDaniel</u>			
Inventor's Signature	<u>H. Reginald McDaniel</u>			Date	2/8/99		
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City	<u>Mansfield</u>	State	<u>TX</u>	ZIP	<u>76063</u>	Country	<u>U.S.</u>
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
<u>D. Eric</u>				<u>Moore</u>			
Inventor's Signature	<u>D. Eric Moore</u>			Date	8 Feb 99		
Residence: City	<u>Richardson</u>	State	<u>TX</u>	Country	<u>U.S.</u>	Citizenship	<u>U.S.</u>
Post Office Address	<u>2911 Old Mill Run TX</u>						
Post Office Address							
City	<u>Grapevine</u>	State	<u>TX</u>	ZIP	<u>76051</u>	Country	<u>U.S.</u>
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
<u>Eileen P.</u>				<u>Vennum</u>			
Inventor's Signature	<u>Eileen P. Vennum</u>			Date	8 Feb 99		
Residence: City	<u>Grand Prairie</u>	State	<u>TX</u>	Country	<u>U.S.</u>	Citizenship	<u>U.S.</u>
Post Office Address	<u>2229 N. Westfield TX</u>						
Post Office Address							
City	<u>Grand Prairie</u>	State	<u>TX</u>	ZIP	<u>75050</u>	Country	<u>U.S.</u>

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
<u>William C.</u>				<u>Fioretti</u>			
Inventor's Signature	<u>William C. Fioretti</u>			Date		<u>2/8/99</u>	
Residence: City	<u>Grapevine</u>	State	<u>TX</u>	Country	<u>U.S.</u>	Citizenship	<u>U.S.</u>
Post Office Address	<u>2224 Lakeridge Drive TX</u>						
Post Office Address							
City	<u>Grapevine</u>	State	<u>TX</u>	ZIP	<u>76051</u>	Country	<u>U.S.</u>
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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